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CONFIRMATION NO. 7582

Bib Data Sheet

SERIAL NUMBER 10/075,423	FILING DATE 02/13/2002 RULE	CLASS 601	GROUP ART UNIT 3764	ATTORNEY DOCKET NO. 00471/268588
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/268,463 02/13/2001

*Cdk**Nope**DA*

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE
GRANTED

** 03/12/2002

** SMALL ENTITY **

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance
Verified and Acknowledged	<i>Dale W.</i>
Examiner's Signature	Initials

STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
NC	4	28	3

ADDRESS

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TITLE

Therapeutic bag THERMAL WRAP FOR BODY MEMBER

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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